

<p>Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3>		<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Number</td> <td>10/715,476-Conf. #3741</td> </tr> <tr> <td>Filing Date</td> <td>November 19, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Makoto SHIZUKUISHI</td> </tr> <tr> <td>Examiner Name</td> <td>Amy R. Hsu</td> </tr> <tr> <td>Art Unit</td> <td>2622</td> </tr> <tr> <td>Attorney Docket No.</td> <td>0649-0923P</td> </tr> </table>		Application Number	10/715,476-Conf. #3741	Filing Date	November 19, 2003	First Named Inventor	Makoto SHIZUKUISHI	Examiner Name	Amy R. Hsu	Art Unit	2622	Attorney Docket No.	0649-0923P
Application Number	10/715,476-Conf. #3741														
Filing Date	November 19, 2003														
First Named Inventor	Makoto SHIZUKUISHI														
Examiner Name	Amy R. Hsu														
Art Unit	2622														
Attorney Docket No.	0649-0923P														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$) 270.00</b>													

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch &amp; Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

### FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES		Small Entity	
Fee Description	Fee (\$)	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)		50	25
Each independent claim over 3 (including Reissues)		210	105
Multiple dependent claims		370	185

Total Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
49	-46	=	3	x	50.00	=	150.00
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims		Fee (\$)		Fee Paid (\$)	
5	-6	=		x		=	
HP = highest number of independent claims paid for, if greater than 3.							

3. APPLICATION SIZE FEE					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	
- 100	=	/50	=	(round up to a whole number) x	

4. OTHER FEE(S)		Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge), \$251 Extension for response within first month		120.00

<b>SUBMITTED BY</b>		
Signature:	Registration No. (Attorney/Agent): <b>39,491</b>	Telephone: <b>(703) 205-8000</b>
Name (Print/Type): <b>Michael R. Cammarata</b>	Date: <b>April 14, 2008</b>	